

**ABSTRACT**

**DRUG UTILIZATION STUDY OF DIURETICS  
IN HEPATIC CIRRHOSIS PATIENT WITH ASCITES  
(Studied in Inpatient Rooms of Internal Medicine Installation  
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Cirrhosis is an advanced stage of liver fibrosis. Ascites is the most common complication of cirrhosis. Diuretics (spironolactone with or without furosemide) are the first-line treatment of patients with cirrhosis and ascites. The purpose of this study is to identify the profile of diuretic drugs for hepatic cirrhosis patient with ascites, and the possibility of Drug Related Problem (DRP) in diuretic therapy for hepatic cirrhosis patient with ascites at RSUD Dr. Soetomo Surabaya.

Data was collected crosssectionally with non-random and time limited sampling method in the period of 22 March until 22 June 2016 in inpatient rooms of Internal Medicine Installation RSUD Dr. Soetomo Surabaya. The inclusion criteria were all hepatic cirrhosis inpatient with ascites complication ongoing diuretic therapy for 3 days or more. This methodology has been approved by ethics committee of RSUD Dr. Soetomo Surabaya.

The results of observational study on 34 patients showed that the diuretic profile that used in this study were spironolactone monotherapy (32,4%), furosemide monotherapy (14,7%), and combination of spironolactone and furosemide (73,5%). Spironolactone mostly used orally with 1-3 x 25-300 mg daily dose, while furosemide mostly used IV with 1-4 x 10-120 mg daily dose. Drug Related Problem (DRP) observed in this study were adverse drug reaction such as hyponatremia (32,4%), hypokalemia (17,7%), and hyperuricemia (2,9%) due to furosemide, and hyperkalemia (5,9%) due to spironolactone; potential drug interaction in the use of furosemide-digoxin (2,9%), spironolactone-digoxin (2,9%), spironolactone-ASA (2,9%), and spironolactone- potassium supplements (44,1%). Actual drug interaction was not found in this study.

**Keywords:** Diuretics, Spironolactone, Furosemide, Hepatic Cirrhosis, Ascites